

Name (print)	Office (if applicable)	District (if applicable)
Mailing Address (include city and zip code)		Telephone No.
E-Mail Address		
Select Appropriate Box(es) <input type="checkbox"/> LOCAL BALLOT ADVOCACY GROUP <input type="checkbox"/> AMENDED		

- ☐ **Annual Filing - Due January 15, 2008**  
Period: January 1, 2007 – December 31, 2007
- ☐ **Report #1 — Due August 5, 2008\***  
Period: Jan. 1, 2008 — July 31, 2008
- ☐ **Report #2 Due — October 28, 2008\***  
Period: Aug. 1, 2008 — Oct. 23, 2008
- ☐ **Report #3 Due — January 15, 2009\*\***  
Period: Oct. 24, 2008 — Dec. 31, 2008
- ☐ **Annual Filing – Due January 15, 2009**  
Period: January 1, 2008 – December 31, 2008

FOR OFFICE USE ONLY

\*\* Third Report suffices for 2009 Annual Filing if BAG also filed Report Nos. 1 and 2

CONTRIBUTIONS SUMMARY		This Period	Cumulative From Beginning of Report Period #1 through End of This Reporting Period
1. Total Monetary Contributions Received in Excess of \$1,000			
2. Total Monetary Contributions in the form of loans guaranteed by a third party.			
3. Total Monetary Contributions in the form of loans that were forgiven			
	This Period	Cumulative From Beginning of Report Period #1 Through End of This Reporting Period	
4. Total Amount of Monetary Contributions Received (Add Lines 1 through 3)			
5. Total Amount of Written Commitments for Contributions (When commitment is funded, report as contribution (monetary or in kind))			
6. Total Value of In Kind Contributions Received in Excess of \$1,000			

EXPENSES SUMMARY		
7. Total Monetary Expenses Paid in Excess of \$1,000		
8. Total Value of In Kind Expenses in Excess of \$1,000		
9. Disposition of Unspent Contributions		

AFFIRMATION

I Declare Under Penalty of Perjury That the Foregoing is True and Correct.

Signature

Date

Name (print)

Office (if applicable)

District (if applicable)

Contributions in Excess of \$1000 or, When Added Together from One Contributor Exceeds \$1000  
Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN	NAME AND ADDRESS OF 3 <sup>RD</sup> PARTY IF LOAN GUARANTEED BY 3 <sup>RD</sup> PARTY	NAME AND ADDRESS OF PERSON WHO FORGAVE THE LOAN, IF DIFFERENT THAN CONTRIBUTOR

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Name (print)

Office (if applicable)

District (if applicable)

Written Commitments in Excess of \$1000 or, When Added Together from One Entity Exceeds \$1000  
Transfer Total Amount of All Written Commitments to Line 5 of Contributions Summary

NAME AND ADDRESS OF PERSON WHO MADE THE COMMITMENT	DATE OF EACH COMMITMENT	AMOUNT OF EACH COMMITMENT

This page may be copied or duplicated if additional space is needed.

Name (print)

Office (if applicable)

District (if applicable)

Expense Categories

CATEGORIES	CODE
Office expenses	A
Expenses related to volunteers	B
Expenses related to travel	C
Expenses related to advertising	D
Expenses related to paid staff	E
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	H
** Goods and services provided in kind for which money would otherwise have been paid	I
Other miscellaneous expenses	J

**\*\* NRS 294A.362 requires “In Kind” contributions and expenses to be reported on a separate form, which is attached.**

Name (print)

Office (if applicable)

District (if applicable)

Expenses in Excess of \$1000

Transfer Total Amount of All Campaign Expenses to Line 7 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE

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# IN KIND CONTRIBUTIONS AND EXPENSES REPORT

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IN KIND CONTRIBUTION IS DEFINED AS THE VALUE OF SERVICES PROVIDED IN KIND FOR WHICH MONEY WOULD HAVE OTHERWISE BEEN PAID.

*In kind contributions and expenses include: paid polling and resulting data, paid direct mail, paid solicitation by telephone, any paid paraphernalia that was printed or otherwise produced to promote a campaign and the use of paid personnel to assist in a campaign. An in kind contribution may also include, but is not limited to: goods and services such as billboards, office space, printing, food and beverage and yard signs.*

The donor of in kind contributions shall furnish to the recipient (candidate or other person), a written statement setting forth the actual cost of those services or the fair market value within 30 days after the time he furnishes those services. (NAC 294A.043)

*Examples of in kind contributions: (1) A person contributes billboard space and does not charge the candidate. The candidate would report the fair market value or actual cost of the billboard space as an in kind contribution; (2) A person pays for the printing cost of political signs for a candidate. The candidate would report the actual cost or fair market value of printing the signs as an in kind contribution.*

*Example of in kind expenses: (1) A person contributes the use of a large room to a candidate as an in kind contribution. Once the candidate utilizes the room it becomes an in kind expense to be reported.*

Name (print)

Office (if applicable)

District (if applicable)

IN KIND

Contributions in Excess of \$1000 or, When Added Together from One Contributor Exceeds \$1000  
Transfer Total Value of All In-Kind Campaign Contributions to Line 6 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH IN KIND CONTRI- BUTION	DESCRIPTION OF EACH IN KIND CONTRIBUTION	VALUE OR COST OF EACH IN KIND CONTRIBUTION/ COMMITMENT	CHECK HERE IF LOAN	NAME AND ADDRESS OF 3 <sup>RD</sup> PARTY IF LOAN GUARANTEED BY 3 <sup>RD</sup> PARTY	NAME AND ADDRESS OF PERSON WHO FORGAVE THE LOAN

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Name (print)

Office (if applicable)

District (if applicable)

In Kind Written Commitments in Excess of \$1000 or, When Added Together from One Entity Exceeds \$1000  
Transfer Total Amount of All Written Commitments to Line 5 of Contributions Summary

NAME AND ADDRESS OF PERSON WHO MADE THE IN KIND COMMITMENT	DATE OF EACH IN KIND COMMITMENT	AMOUNT OF EACH IN KIND COMMITMENT

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Name (print)

Office (if applicable)

District (if applicable)

IN KIND

Expenses in Excess of \$1000  
Transfer Total Value of All In-Kind Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE IN KIND GOOD(S) OR SERVICE(S)	DESCRIPTION OF EACH IN KIND EXPENSE	DATE OF EACH IN KIND EXPENSE	VALUE OR COST OF EACH IN KIND EXPENSE

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Prescribed by Secretary of State  
NRS 294A.120, 294A.125,  
294A.140, 294A.150, 294A.160  
294A.200, 294A.210, 294A.220, 294A.362